Mr. Michael Fogarty State Medicaid Director Oklahoma Health Care Authority 4545 North Lincoln Boulevard - Suite 124 Oklahoma City, Oklahoma 73105

Our Reference: WA-OK#0179.90.R1.02

Dear Mr. Fogarty:

I am pleased to inform you that your amendment request for the Oklahoma Home and Community-Based Services Waiver (HCBSW) No. 0179.90.R1 has been approved with an effective date of July 1, 1997. This HCBSW program, as authorized under the provisions of 1915(c) of the Social Security Act, provides community-based services as an alternative to individuals who would otherwise require institutional care in Intermediate Care Facilities for the Mentally Retarded (ICF/MR). This amendment has been assigned control number 0179.90.R1.02. This control number should be used in all future correspondence regarding the waiver.

Specifically, this amendment provides the following changes:

- 1. An updated and revised Procedural Instructions Section related to approval of Plans of Care in the following areas:
  - Updates the current practices for Plan of Care reviews and approvals utilized by DHS/DDSD and OHCA staff,
  - Removes certain specific data system references and replaces with tasks required for Plan of Care approvals, and
  - Changes the frequency of required psychological evaluations for ongoing determinations of Level of Care (LOC) needs;
- 2. A revision of the Factor "C" (unduplicated recipients) Waiver values; and
- 3. A revised Appendix G-2 (Factor "G" utilization and cost estimate values).

The following estimates of utilization and cost of waiver services have been approved:

<u>Year</u>	<u>Unduplicated Recipients</u>	Factor "D"
2	2,782	\$43,834
3	3,102	\$45,530
4	3,422	\$46,115

5 3,742 \$46,550

For your convenience, we have included a copy of the approved waiver replacement pages. If you have any questions, please contact Joe Reeder of my staff at (214) 767-6279.

Sincerely,

James Randolph Farris, M.D. Regional Administrator

Enclosure

cc: Director, Center for Medicaid

and State Operations